

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 063358
APPLICANT(S)

FILING DATE 8/5/03

CLAIMS						
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
IND	DEP	IND	DEP	IND	DEP	
1						31
2						32
3						33
4						34
5						35
6						36
7						37
8						38
9						39
10						40
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47						
48						
49						
50						
TOTAL IND.		TOTAL DEP.		TOTAL CLAIMS		TOTAL IND.
2		2		4		
2		2		4		
5		4		9		